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JUL 24 2006

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/045,893
		Filing Date	January 12, 2002
		First Named Inventor	Koteschwerrao Adusumilli
		Art Unit	2134
		Examiner Name	Brown, Christopher J.
Total Number of Pages in This Submission	17	Attorney Docket Number	42390P12318X

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Fee Transmittal Sheet </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Brent E. Vecchia</i>
Date	July 24, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Pat Sullivan		
Signature	<i>Pat Sullivan</i>	Date	July 24, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (vtr) 11/30/2005.
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JUL 24 2006

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	10/045,893
Filing Date	January 12, 2002
First Named Inventor	Koteshwer Rao Adusumilli
Examiner Name	Brown, Christopher J.
Art Unit	2134
Attorney Docket No.	42390P12318X

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
28 - 32 =	0	50.00	\$0.00
Independent Claims 4 - 7 =	0	200.00	\$0.00
Multiple Dependent			
Large Entity	Small Entity	Fee Description	
Fee Code (\$)	Fee Code (\$)		
1202 50	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 300	2203 180	Multiple Dependent claim, if not paid	
1204 790	2204 395	**Reissue independent claims over original patent	
1205 500	2205 150	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)		(\$)	0.00

*for number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1081 130	2051 65	Surcharge - late filing fee or oath	
1082 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402	2402	Filing a brief in support of an appeal	
1403	2403	Request for oral hearing	
1451	2451	Petition to institute a public use proceeding	
1460	2460	Petition to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Sum.	
1809 790	1809 385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 790	2810 385	For each additional invention to be examined (37 CFR § 1.128(b))	
Other fee (specify)			
SUBTOTAL (2)		(\$)	

SUBMITTED BYName (Print/Type) Brent E. VecchiaRegistration No.
(Attorney/Agent)

48,011

Complete (if applicable)

Telephone (303) 740-1980

Signature

Brent E. Vecchia

Date

07/24/06

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/h) 12/15/2004.
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JUL 24 2006

**FEE TRANSMITTAL
for FY 2005**

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Complete if Known

Application Number	10/045,893
Filing Date	January 12, 2002
First Named Inventor	Koteshwerrao Adusumilli
Examiner Name	Brown, Christopher J.
Art Unit	2134
Attorney Docket No.	42390P12318X

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____

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☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
25	0	50.00	\$0.00
Independent Claims	0	200.00	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 60	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 160	Multiple Dependent claim, if not paid
1204 790	2204 395	**Reissue independent claims over original patent
1205 800	2205 150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$)

*or number previously paid, if greater; For Reissues, see below

0.00

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1051 130	2051 85	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
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1403	2403	Request for oral hearing
1451	2451	Petition to institute a public use proceeding
1450	2450	Petition to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(g)
1806 180	1806 180	Submission of Information Disclosure Stmt
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 790	2610 395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature	<i>Brent E. Vecchia</i>	Date	07/24/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/ 12/15/2004).
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JUL 24 2006

Our Docket No: 42P12318X

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Koteshwerrao Adusmilli

Examiner: Brown, Christopher J.

Application No: 10/045,893

Art Unit: 2134

Filed: January 12, 2002

For: Mechanism For Supporting Wired
And Wireless Methods For Client
And Server Side AuthenticationRESPONSE TO OFFICE ACTIONCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed 04/24/2006, the Applicants respectfully request that the Examiner enter the following amendments and consider the following remarks.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be transmitted via facsimile to the United States Postal Service at (571) 273-8300 on the date indicated below:

July 24, 2006

Date of Transmission

Pat Sullivan

Name of Person Transmitting Correspondence

Signature *Pat Sullivan*

07/24/2006

Date

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